

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Serial No.: 10/056,348  
Applicant: Ronald M. Burch, et al.  
Filed: 01/25/2002  
Art Unit: 1639  
Examiner: Bennett M. Celsa  
For: **Analgesic Combination of Oxycodone and Nabumetone**  
Docket No.: 200.1079CON4

Mail Stop: AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

April 18, 2005

**RESPONSE**

**I. INTRODUCTORY COMMENTS**

Sir:

In response to the Final Office Action of January 19, 2005, please reconsider the above-identified patent application based on the following remarks:

**Listing of the Claims** begins on page 2 of this document.

**Remarks/Arguments** begin on page 4 of this document.

FORM PTO-1083  
MAIL STOP: AF  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22314-1450



Docket No.: 200.1079CON4  
Date: April 18, 2005

In re application of: Ronald M. BURCH, et al.  
Serial No.: 10/056,348  
Filed: January 25, 2002  
For: ANALGESIC COMBINATION OF OXYCODONE AND NABUMETONE

Sir:

Transmitted herewith is a **Response to Office Action** in the above-identified application.

Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.  
 Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27.  
 No fee for additional claims is required.  
 A filing fee for additional claims calculated as shown below, is required:

(Col. 1) FOR:	(Col. 2) REMAINING AFTER AMENDMENT		SMALL ENTITY RATE PRESENT PAID FOR EXTRA		OR	LARGE ENTITY RATE \$	
	MINUS	=	0	x \$ 9	\$	x \$ 18	\$
TOTAL CLAIMS	Minus	=	0	x \$ 9	\$	x \$ 18	\$
INDEP. CLAIMS	Minus	=	0	x \$ 42	\$	x \$ 84	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+ \$140	\$		+ \$280	\$

TOTAL: \$ OR TOTAL: \$

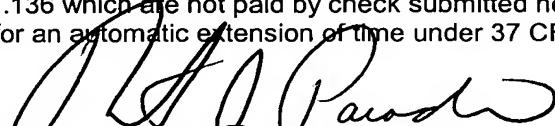
\* If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

Also transmitted herewith are:  
 Petition for extension under 37 C.F.R. 1.136  
 Other:

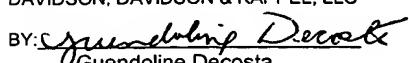
Check(s) in the amount of \$0.00 is/are attached to cover:  
 Filing fee for additional claims under 37 C.F.R. 1.16  
 Petition fee for extension under 37 C.F.R. 1.136  
 Other:

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.

Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.  
 Any patent application processing fees under 37 C.F.R. 1.17.  
 Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.

  
Robert J. Paradiso, Reg. No. 41,240  
DAVIDSON, DAVIDSON & KAPPEL, LLC  
485 Seventh Avenue, 14<sup>th</sup> Floor  
New York, New York 10018  
Tel: (212) 736-1940  
Fax: (212) 736-2427

I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with sufficient postage to the United States Postal Service as "first class mail" in an envelope addressed to "Commissioner for Patents, Alexandria, VA 22314-1450" on April 18, 2005.  
DAVIDSON, DAVIDSON & KAPPEL, LLC

BY:   
Guendoline Decosta